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CONFIRMATION NO. 7413

<b>SERIAL NUMBER</b> 09/829,073	<b>FILING OR 371(c) DATE</b> 04/09/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> #651
<b>APPLICANTS</b> Ke-Wen Dong, Chesapeake, VA; Sergio C. Oehninger, Norfolk, VA; William E. Gibbons, Norfolk, VA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/252,828 02/19/1999 which claims benefit of 60/075,079 02/19/1998				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 06/13/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 21
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 24395				
<b>TITLE</b> HUMAN ZONA PELLUCIDA PROTEIN 3 AND USES THEREOF				
<b>FILING FEE RECEIVED</b> 444	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	